BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

10003978-1

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
		(Column	(Column 1)		(Column 2)		TYPE		OR SMALL		ENTITY	
TOTAL CLAIMS 29								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS 29				minus 20= *		. 9		X\$ 9=		OR	X\$18=	162
INDEPENDENT CLAIMS 3 minus				nus 3 =	. 0			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter						olumn 2		TOTAL		OR	TOTAL	872
CLAIMS AS AMENDED - PART II								SMALL E	ENITITY	OR	OTHER SMALL E	
		(Column 1) CLAIMS		(Colui		(Column 3)		SWALL		On I	SWALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T 01 4114	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JUIPLE DEF	ENDEN	CLAIM			+135=		OR	+270=	-
							1	TOTAL			TOTAL	
ADDIT. FE										On	ADDIT. FEE	
_		(Column 1)			mn 2) HEST	(Column 3)	1 .			i		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	TCLAIM		J	· +135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= :		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=]	X40=			X80=	
lacksquare	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM			7,40=		OR		
•			ha antoria astr		- 407	t 2		+135=		OR	+270=`	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		ımber Previously F							ronriste bo	v in co		